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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| t 1: Identify Yourself | | | |
|--|---|---|--|
| | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | | | |
| Write the name that is on | Argeniz | | |
| your government-issued picture identification (for example, your driver's | First name | | First name |
| license or passport). | Middle name | | Middle name |
| Bring your picture | Diaz Granados | | |
| meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| | 3 | | |
| • | | | |
| maiden names. | | | |
| Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4773 | | |
| | Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Diaz Granados Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Diaz Granados Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number Argeniz First name Diaz Granados Last name and Suffix (Sr., Jr., II, III) |

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Case number (if known)

Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Argeniz Diaz Granados

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Business name(s) Include trade names and Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2039 S. Canalaport, Garden Unit Chicago, IL 60616 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason.

Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Argeniz Diaz Granados

Case number (if known)

| Part | Tell the Court About | Your B | Bankruptcy Ca | ise | | | |
|------|---|-----------|-----------------|--|---|--|------------------------------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bank e box. | ruptcy |
| | choosing to file under | Chapter 7 | | | | | |
| | | □с | Chapter 11 | | | | |
| | | □с | Chapter 12 | | | | |
| | | □с | Chapter 13 | | | | |
| | | | | | | | |
| 8. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is subi | pically, if you are paying the fee yo | k with the clerk's office in your local court for mo urself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or cl | or money |
| | | | | | tallments. If you choose this optices (Official Form 103A). | n, sign and attach the Application for Individuals | s to Pay |
| | | | I request tha | it my fee be wa | aived (You may request this option | only if you are filing for Chapter 7. By law, a jud | dge may, |
| | | | applies to yo | uired to, waive y ur family size ar | your fee, and may do so only if yo nd you are unable to pay the fee ir | ur income is less than 150% of the official pover installments). If you choose this option, you mu | ty line that ist fill out |
| | | | the Application | on to Have the (| Chapter 7 Filing Fee Waived (Office | ial Form 103B) and file it with your petition. | |
| | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No | 0. | | | | |
| | last 8 years? | □Y€ | es. | | | | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | | | | | |
| 10. | Are any bankruptcy | ■ No | 0 | | | | |
| | cases pending or being filed by a spouse who is | □ Ye | es. | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your | ■ No | Go to I | ine 12. | | | |
| | residence? | | 0. | | ained an eviction judgment agains | t vou? | |
| | | □ Ye | _ | No. Go to line | , , , | you: | |
| | | | | | | ludgment Against You (Form 101A) and file it as | nart of |
| | | | | this bankruptcy | | ruuginerit Against 100 (FOITH 101A) and file it as | part 01 |
| | | | | | | | |

| Debtor 1 | Argeniz Diaz Granados | Document | Page 4 of 47 | Case number (if known) | |
|----------|-----------------------|----------|--------------|------------------------|--|
| | | | | | |

| Part | Report About Any Bu | sinesses | You Own | as a Sole Proprieto | or | |
|------|---|------------------------|---|-------------------------|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | |
| | | ☐ Yes. | Name | and location of busi | ness | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | |
| | If you have more than one sole proprietorship, use a | | Numb | er, Street, City, State | e & ZIP Code | |
| | separate sheet and attach it to this petition. | | Checi | k the appropriate box | to describe your business: | |
| | | | | Health Care Busine | ess (as defined in 11 U.S.C. § 101(27A)) | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | |
| | | | | Stockbroker (as de | fined in 11 U.S.C. § 101(53A)) | |
| | | | | Commodity Broker | (as defined in 11 U.S.C. § 101(6)) | |
| | | | | None of the above | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follo in 11 U.S.C. 1116(1)(B). | | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chapt | er 11. | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | |
| | | ☐ Yes. | I am f | iling under Chapter 1 | 1 and I am a small business debtor according to the definition in the Bankruptcy Code. | |
| Pari | : 4: Report if You Own or | Have Any | Hazardo | ous Property or Any | Property That Needs Immediate Attention | |
| 14. | Do you own or have any | ■ No. | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. | What is | the hazard? | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs | | If immed | liate attention is | | |
| | immediate attention? | | needed, | why is it needed? | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number, Street, City, State & Zip Code | |
| | | | | | , , , | |

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Debtor 1 Argeniz Diaz Granados

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 47 Case number (if known) Debtor 1 **Argeniz Diaz Granados** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Argeniz Diaz Granados Signature of Debtor 2 **Argeniz Diaz Granados**

Executed on

MM / DD / YYYY

Signature of Debtor 1

May 15, 2018 MM / DD / YYYY

Executed on

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Debtor 1 Argeniz Diaz Granados

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David Gallag | her | Date | May 15, 2018 |
|---------------------------|---------------|---------------|---------------------------|
| Signature of Attorn | ey for Debtor | | MM / DD / YYYY |
| | | | |
| David Gallagher | • | | |
| Printed name | | | |
| Upright Law LL | C | | |
| Firm name | | | |
| 79 West Monroe | • | | |
| Fifith Floor | | | |
| Chicago, IL 606 | 03 | | |
| Number, Street, City, Sta | | | |
| Contact phone 312- | 546-4264 | Email address | dgallagher@uprightlaw.com |
| 6295024 IL | | | |
| Par number 9 State | | | |

| | | Docume | ent Page 8 of 47 | | | |
|---|-------------------------|-------------------|------------------|--|--|--|
| Fill in this infor | mation to identify your | case: | | | | |
| Debtor 1 | Argeniz Diaz Granados | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Case (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | Your as | ssets of what you own |
|----|---|--------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 4,360.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 4,360.00 |
| Pa | rt 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 21,644.90 |
| | Your total liabilities | \$ | 21,644.90 |
| Pa | rt 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,560.04 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,640.00 |
| Pa | rt 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Argeniz Diaz Granados

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,163.57 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total cla | im |
|--|-----------|------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 18-14104 Doc 1 Filed 05/15/18 Entered 05/15/18 12:59:17 Desc Main Page 10 of 47 Document Fill in this information to identify your case and this filing: Debtor 1 **Argeniz Diaz Granados** Middle Name First Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No

Yes. Describe.....

Houeshold Goods and Furnishings

\$1,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

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Case number (if known) Document Debtor 1 **Argeniz Diaz Granados** Used Electronics \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 Necessary Wearing Apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$50.00 Costume Jewerly 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$0.00 Two cats and a dog 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No $\hfill \square$ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,450.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

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Case number (if known) Document

Debtor 1 **Argeniz Diaz Granados**

| | | | | | Cash on hand at time of filing | \$0.00 |
|----|--|-----------|-------------------------|---|--|-----------------------|
| 17 | | | | counts; certificates of deposit; sh is with the same institution, list e | nares in credit unions, brokerage houses ach. | , and other similar |
| | ■ Yes | | | Institution name: | | |
| | | 17.1. | Checking | Chase Bank Accour | nt | \$330.00 |
| | | 17.2. | Savings | Chase Bank Accour | nt | \$1,580.00 |
| 18 | Bonds, mutual funds, or Examples: Bond funds, in ■ No | | | rokerage firms, money market a | ccounts | |
| | ☐ Yes | | Institution or issue | r name: | | |
| 19 | joint venture | ck and | interests in incorp | porated and unincorporated be | usinesses, including an interest in an | LLC, partnership, and |
| | ■ No □ Yes. Give specific infor | | about themne of entity: | | % of ownership: | |
| 20 | Negotiable instruments in | nclude p | ersonal checks, ca | otiable and non-negotiable instables instables instables and non-negotiable instables instables and someone by signing or | s, and money orders. | |
| | ■ No | | | | | |
| | ☐ Yes. Give specific inform | | about them uer name: | | | |
| 21 | Retirement or pension a Examples: Interests in IR No | | | 403(b), thrift savings accounts, | or other pension or profit-sharing plans | |
| | ■ Yes. List each account | | ely. of account: | Institution name: | | |
| | | TSP | | U.S. Military | | Unknown |
| 22 | | deposit | s you have made s | so that you may continue service , public utilities (electric, gas, wa Institution name or indiv | ater), telecommunications companies, or | others |
| 23 | Annuities (A contract for | a period | dic payment of mor | ney to you, either for life or for a | number of years) | |
| | | ıer nam | e and description. | | | |
| 24 | 26 U.S.C. §§ 530(b)(1), 52 | | | qualified ABLE program, or ur | nder a qualified state tuition program. | |
| | ■ No □ YesInst | itution r | name and description | on. Separately file the records of | f any interests.11 U.S.C. § 521(c): | |
| 25 | Trusts, equitable or futu ■ No | re inte | rests in property (| other than anything listed in li | ine 1), and rights or powers exercisal | le for your benefit |

☐ Yes. Give specific information about them...

| Dal | | Case 18-1410 | 4 Do | oc 1 Filed 05/15/18 Document | B Entered 05/19 Page 13 of 47 | 5/18 12:59:17 | Desc Main |
|----------------------|--|--|---|--|--|----------------------------------|---|
| Dei | btor 1 | Argeniz Diaz Gran | ados | Document | | Case number (if known) | |
| ı | Example ■ No | | mes, web | e secrets, and other intellec sites, proceeds from royalties hem | | ts | |
| 27. | | es, franchises, and ot les: Building permits, e | | ral intangibles censes, cooperative associati | on holdings, liquor licens | es, professional licens | es |
| _ | ■ No □ Yes. | Give specific information | on about th | hem | | | |
| Мо | ney or p | property owed to you | ? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Tax refu □ No | unds owed to you | | | | | |
| | Yes. 0 | Give specific informatio | n about th | nem, including whether you all | ready filed the returns an | d the tax years | |
| | | | | 2017 | | | |
| | | | | Received \$833.00 a necessites | and spent on | Federal | \$0.00 |
| [| Other a | | es you ability insu | urance payments, disability be nade to someone else | enefits, sick pay, vacation | pay, workers' compe | nsation, Social Security |
| [| | Give specific information | on | | | | |
| [31. [| ☐ Yes. Interest Example ☐ No | Give specific information in the specific information is in insurance policientles: Health, disability, contact in the specific information in the | on e s r life insur | rance; health savings account | (HSA); credit, homeown | er's, or renter's insurar | nce |
| [31. [| ☐ Yes. Interest Example ☐ No | Give specific information to the sin insurance policies: Health, disability, converted the insurance converted to the single sin | on e s r life insur | rance; health savings account | (HSA); credit, homeown Beneficiar | | nce Surrender or refund value: |
| [31. [| ☐ Yes. Interest Example ☐ No | Give specific information ts in insurance policientles: Health, disability, of the insurance co | on s r life insur mpany of company r | rance; health savings account | | | Surrender or refund |
| [31. [| ☐ Yes. Interest Example ☐ No | Give specific information in the state of th | on s r life insur mpany of company r | rance; health savings account each policy and list its value. name: e Insurance with Miltary | | | Surrender or refund |
| [] 31. | ☐ Yes. Interest Examp. ☐ No ☐ Yes. N Any interest If you a someon ☐ No | Give specific informations in insurance policies. Health, disability, of the control of the cont | on r life insur mpany of company r ferm Life lo cash v is due yo living trust | rance; health savings account each policy and list its value. name: e Insurance with Miltary | Beneficiar | y: | Surrender or refund value: |
| 31. [] 32. | Any interest Examp. No Yes. N Any interest If you a someor No Yes. Claims Examp. No | Give specific informations in insurance policies. Health, disability, on the insurance control of the insurance control o | es r life insur mpany of company r rerm Life lo cash visa due yo living trust on | rance; health savings account each policy and list its value. name: e Insurance with Miltary value | Beneficiar ied insurance policy, or are o | y: currently entitled to rece | Surrender or refund value: |

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|---|---------------------------|
| Debtor 1 Argeniz Diaz Granados Case number | (if known) |
| 35. Any financial assets you did not already list | |
| ■ No | |
| ☐ Yes. Give specific information | |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have atta for Part 4. Write that number here | |
| | |
| Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. | |
| 37. Do you own or have any legal or equitable interest in any business-related property? | |
| ■ No. Go to Part 6. | |
| ☐ Yes. Go to line 38. | |
| | |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| If you own or have an interest in farmland, list it in Part 1. | |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related proper | ty? |
| ■ No. Go to Part 7. | |
| ☐ Yes. Go to line 47. | |
| | |
| Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. Do you have other property of any kind you did not already list? | |
| Examples: Season tickets, country club membership | |
| ■ No | |
| ☐ Yes. Give specific information | |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here | \$0.00 |
| | |
| Part 8: List the Totals of Each Part of this Form | |
| EE Dowt 4. Total year actata line 2 | * 0.00 |
| 55. Part 1: Total real estate, line 2 | . \$0.00 |
| 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$2,450.00 | |
| 58. Part 4: Total financial assets, line 36 \$1,910.00 | |
| 59. Part 5: Total business-related property, line 45 \$0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 | |
| 61. Part 7: Total other property not listed, line 54 + \$0.00 | |
| 62. Total personal property. Add lines 56 through 61 \$4,360.00 Copy personal | property total \$4,360.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | \$4,360.00 |

Official Form 106A/B Schedule A/B: Property page 5

Page 15 of 47 Document Fill in this information to identify your case: Debtor 1 **Argeniz Diaz Granados** Middle Name Last Name First Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the / | Property | You | Claim | as | Exempt |
|---------|----------|-------|-----------------|-----|-------|----|--------|
|---------|----------|-------|-----------------|-----|-------|----|--------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--------------------------------------|--------------------------------|---|---|
| Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| \$1,500.00 | \$1,500.00 | | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(a) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$330.00 | | \$330.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| | \$1,500.00 \$1,500.00 \$500.00 | \$1,500.00 | Schedule A/B \$1,500.00 \$1,500.00 \$1,00% of fair market value, up to any applicable statutory limit \$400.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$330.00 \$330.00 \$100% of fair market value, up to any applicable statutory limit |

Document Page 16 of 47 **Argeniz Diaz Granados** Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Savings: Chase Bank Account** 735 ILCS 5/12-1001(b) \$1,580.00 \$1,580.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit TSP: U.S. Military 735 ILCS 5/12-1006 \$0.00 Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

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Desc Main

| 3. | Are you | claimi | ng a | homeste | ead exe | mption | of more | thar | า \$160,37 | 75? |
|----|---------|--------|------|---------|---------|--------|---------|------|------------|-----|
| | | | | | | | | | | |

Doc 1

Case 18-14104

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 05/15/18

- No
- Yes

Case 18-14104 Doc 1 Filed 05/15/18 Entered 05/15/18 12:59:17 Desc Main Document Page 17 of 47

| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|-------------------|-------------|--|
| Debtor 1 | Argeniz Diaz Gra | nados | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | 0430 10 14104 2 | Document | Page 18 | R of 47 | Desc Main |
|------------------|--|---|-------------------|--|------------------------------------|
| Fill in this | s information to identify your o | | 1 446 16 | 3 01 41 | |
| Debtor 1 | Argeniz Diaz Grar | nados | | | |
| DODIO! 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fill | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | |
| Case num | ber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 106E/F | | | | |
| | | ho Have Unsecured | Claims | | 12/15 |
| | | e Part 1 for creditors with PRIORIT | | Part 2 for creditors with NONPRIO | |
| Schedule G | : Executory Contracts and Unexp | that could result in a claim. Also li ired Leases (Official Form 106G). D ured by Property. If more space is r | o not include | any creditors with partially secure | ed claims that are listed in |
| eft. Attach | | e. If you have no information to rep | | | |
| Part 1: | List All of Your PRIORITY Un | secured Claims | | | |
| 1. Do any | creditors have priority unsecured | d claims against you? | | | |
| ■ No. | Go to Part 2. | | | | |
| ☐ Yes | S. | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | | |
| 3. Do any | creditors have nonpriority unsec | ured claims against you? | | | |
| □ No. | You have nothing to report in this pa | art. Submit this form to the court with | your other sche | edules. | |
| ■ Yes | | | | | |
| | | simo in the alphabatical arder of th | | halda asah alaim If a araditar baa | mare than one nampriority |
| unsecu | ired claim, list the creditor separately | aims in the alphabetical order of the of for each claim. For each claim listed, st the other creditors in Part 3.If you h | , identify what t | ype of claim it is. Do not list claims a | Iready included in Part 1. If more |
| | | | | | Total claim |
| 4.1 C | apital One | Last 4 digits of acco | ount number | 9202 | \$150.00 |
| No | onpriority Creditor's Name | | | | |
| | ttn: Bankruptcy | When we the debt | | Opened 04/16 Last Activ | re |
| | o Box 30285 alt Lake City, UT 84130 | When was the debt | incurred? | 4/25/17 | |
| | umber Street City State Zlp Code | As of the date you f | ile, the claim i | s: Check all that apply | |
| W | ho incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and and | other Type of NONPRIOR | ITY unsecured | d claim: | |
| | Check if this claim is for a comm | nunity | | | |
| | ebt | | | ration agreement or divorce that you | ı did not |
| | the claim subject to offset? | report as priority clair | | | |
| | No | · | • | g plans, and other similar debts | |
| | l _{Yes} | Other Specify | Credit Card | | |

Document Page 19 of 47 Debtor 1 Argeniz Diaz Granados Case number (if know) 4.2 Credit Control, Llc Last 4 digits of account number 7657 \$1.500.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 7/17/15 Last Active 5757 Phantom Dr. Suite 330 When was the debt incurred? 11/04/15 Hazelwood, MO 63042 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Anderson Hospital Ip Op 4.3 LVNV Funding/Resurgent Capital Last 4 digits of account number 1765 \$253.00 Nonpriority Creditor's Name Po Box 10497 When was the debt incurred? **Opened 01/18** Greenville, SC 29603 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Capital One** Other. Specify ☐ Yes N.A. 4.4 **Ncc Business Svcs Inc** Last 4 digits of account number 8866 \$19,635.00 Nonpriority Creditor's Name 9428 Baymeadows Rd. Suite 200 When was the debt incurred? **Opened 03/15** Jacksonville, FL 32256 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Walk/Res.Mkt.Sys.

Collection Attorney Gaslight

Debtor 1 Argeniz Diaz Granados Document Page 20 of 47
Case number (if know)

| UIC Pathology | Last 4 digits of account number | \$106.90 |
|---|---|----------|
| Nonpriority Creditor's Name 2723 Solution Center | When was the debt incurred? 2018 | |
| Chicago, IL 60677 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | ■ Other. Specify Medical | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Т | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 21,644.90 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 21,644.90 |

| | | Bodanie | 11000 22 01 11 | |
|---|-------------------------|-------------------|----------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Argeniz Diaz Gra | nados | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit Name, Numb | h whom you have the o | contract or lease | State what the contract or lease is for |
|-----|-----------|---------------------------|-----------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | - |
| | City | | State | ZIP Code | _ |
| 2.2 | City | | State | ZIP Code | |
| 2.2 | NI | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | <u> </u> |
| | | | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | Oity | | Ciaio | Zii Godo | |
| 2.0 | Name | | | | _ |
| | 1401110 | | | | |
| | Ni mala a | Ot | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | Jily | | Ciaio | | |

| | | Docume | nt Page 22 d | of 47 | |
|----------------|--|-------------------------------|-----------------------|---|-----|
| Fill in this | s information to identify your | case: | | | |
| Debtor 1 | Argeniz Diaz Gra | nados | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | -) | N. 111 N. | | | |
| (Spouse if, fi | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case num | hher | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| Officia | J Form 106H | | | | |
| | I Form 106H | | | | |
| Sche | dule H: Your Cod | ebtors | | 12/15 | |
| | e and case number (if known you have any codebtors? (If | | | e as a codebtor. | |
| ■ No □ Ye | | | | | |
| Arizo | thin the last 8 years, have you na, California, Idaho, Louisiana . Go to line 3. | | | ry? (Community property states and territories include ington, and Wisconsin.) | |
| ☐ Ye | s. Did your spouse, former spo | use, or legal equivalent live | with you at the time? | | |
| in lin Form | e 2 again as a codebtor only | if that person is a guarant | or or cosigner. Make | r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 06G). Use Schedule D, Schedule E/F, or Schedule G to | ial |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the deb Check all schedules that apply: | t |
| 3.1 | | | | ☐ Schedule D, line | |
| <u></u> | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | <u> </u> | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your | case: | | | | | | | |
|--------------------|--|--|---|----------------------------|------------------------------|----------------------|-----------------------------|------------------------|-----------------|
| Del | otor 1 Argeniz Dia | az Granados | | | | | | | |
| | otor 2 | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for th | e: NORTHERN DISTRIC | T OF ILLINOIS | | _ | | | | |
| | se number | | | | | | | | chapter |
| 0 | fficial Form 106I | | | | Ī | MM / DD/ Y | YYY | | |
| S | chedule I: Your Inc | come | | | | | | | 12/15 |
| sup spo atta | as complete and accurate as posplying correct information. If youse. If you are separated and you have a separate sheet to this form 1: Describe Employment | u are married and not filli our spouse is not filing wi . On the top of any additi | ng jointly, and you th you, do not inc | r spouse i: lude inforn | s living with nation abou | you, inclut your spo | ude informations. If more s | on about space is r | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-filing | spouse | |
| | If you have more than one job, | Employment status* | ■ Employed | | | ☐ Emplo | oyed | | |
| | attach a separate page with information about additional | Linployment status | ☐ Not employed | l | | ☐ Not e | mployed | | |
| | employers. | Occupation | Front House N | /lanager | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Scafuri Baker | / | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 1337 W. Taylo Chicago, IL 60 | | | | | | |
| | | How long employed the | here? 1 yea | r | | | | | |
| | | | *See A | ttachment | for Additio | nal Emplo | yment Inform | ation | |
| Par | Give Details About Mo | onthly Income | | | | | | | |
| | mate monthly income as of the use unless you are separated. | date you file this form. If y | you have nothing to | report for a | any line, writ | e \$0 in the | space. Include | e your non | -filing |
| | u or your non-filing spouse have n e space, attach a separate sheet t | | ombine the informat | ion for all e | mployers for | that perso | n on the lines | below. If y | ou need |
| | | | | | For De | btor 1 | For Debtor non-filing s | | |
| 2. | List monthly gross wages, sal deductions). If not paid monthly | | | 2. | \$1 | ,640.62 | \$ | N/A | |
| 3. | Estimate and list monthly over | rtime pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add | line 2 + line 3. | | 4. | \$1,6 | 40.62 | \$ | N/A | |

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| Deb | tor 1 | Argeniz Diaz Granados | - | (| Case r | number (<i>if ki</i> | nown) | | | | |
|-----|---------------|--|-----------|----|----------|-----------------------|--------------|-------------|------------|----------------|-------------------|
| | | | | | For | Debtor 1 | | | Debtor | | |
| | Con | y line 4 here | 4. | | \$ | 1,640 | 1 62 | \$ | n-filing s | pouse N/A | |
| | ООР | y line 4 nere | • | | Ψ_ | 1,040 | | Ψ_ | | 13/7 | <u> </u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ١. | \$ | 343 | 3.87 | \$ | | N/A | 1 |
| | 5b. | Mandatory contributions for retirement plans | 5b | ١. | \$ | (| 0.00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c | | \$ | | 0.00 | \$_ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ | | 0.00 | \$_ | | N/A | |
| | 5e. | Insurance | 5e | | \$ | | 0.00 | \$ _ | | N/A | _ |
| | 5f. 5g. | Domestic support obligations Union dues | 5f. | | \$ | | 0.00 | \$_ \$ | | N/A N/A | _ |
| | 5g. 5h. | Other deductions. Specify: | 5g 5h | | \$ _ | | 0.00 | + \$- | | N/A | _ |
| 6 | | • • • | _ | | \$ \$ | | | · · · | | | _ |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | · — | | 3.87 | \$_ | | N/A | _ |
| 7. | Calc | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 1,296 | 5.75 | \$_ | | N/A | <u>\</u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | | monthly net income. | 8a | ١. | \$ | (| 0.00 | \$ | | N/A | 1 |
| | 8b. | Interest and dividends | 8b | ١. | \$ | (| 0.00 | \$ | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | | \$ | (| 0.00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d | l. | \$ | | 0.00 | \$ | | N/A | |
| | 8e. | Social Security | 8e | ٠. | \$ | | 0.00 | \$ | | N/A | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g | | \$ \$ | | 0.00 0.00 | \$_ \$_ | | N/A N/A | _ |
| | 8h. | Other monthly income. Specify: Defense Net Income | 8h | .+ | \$ | 263 | 3.29 | + \$_ | | N/A | <u> </u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | 9 | S | 263 | 3.29 | \$_ | | N/ | A |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | - | 1,560.04 | + \$ | | N/A | = \$ | 1,560.04 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ψ_ | | 1,300.04 | T Ψ . | | IV/A | - Ψ - | 1,300.04 |
| 11. | Stat Inclu | e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a second control of the control of | depe | | | | | • | | e J. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | | e. 12. | \$ | 1,560.04 |
| 13. | Do y | you expect an increase or decrease within the year after you file this form | ? | | | | | | | Combi month | lnea ly income |
| | _ | No. Ves Eynlain | | | | | | | | | |

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| Debtor 1 Argeniz Diaz Granados | Case number (if known) |
|--------------------------------|------------------------|
|--------------------------------|------------------------|

Official Form B 6I Attachment for Additional Employment Information

| Debtor | | |
|---------------------|-------------------------|--|
| Occupation | National Guard | |
| Name of Employer | Illinois National Guard | |
| How long employed | 4 years | |
| Address of Employer | 1910 S Calumet Ave | |
| | Chicago, IL 60616 | |

Official Form 106I Schedule I: Your Income page 3

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| Filli | n this information to | identify yo | ur case: | | | 1 | | |
|--------------|------------------------------------|----------------|---------------|--|--|-------------|--------------------------------------|--|
| Debt | or 1 Arg | eniz Diaz | Granado | os | | Che | eck if this is: An amended filing | |
| Debt (Spo | tor 2 ouse, if filing) | | | | | | | wing postpetition chapter the following date: |
| ` . | 5 , | Court for the | NORTH | IERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| | | Journ for the. | NONTI | ILIN DISTRICT OF ILLIN | 010 | | WIWI / DD / TTTT | |
| 1 | e number nown) | | | | | | | |
| | ficial Form | | | | | | | |
| | hedule J: | | | | | | | 12/15 |
| info | | pace is ne | eded, atta | . If two married people ar ch another sheet to this n. | | | | |
| Part | Describe Your Is this a joint case | | hold | | | | | |
| 1. | No. Go to line 2 | | | | | | | |
| | ☐ Yes. Does Deb | | n a separ | ate household? | | | | |
| | □ No □ Yes. De | ebtor 2 mus | t file Offici | al Form 106J-2, <i>Expenses</i> | s for Separate House | ehold of De | btor 2. | |
| 2. | Do you have depo | endents? | ■ No | | | | | |
| | Do not list Debtor Debtor 2. | 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state the dependents name: | | | | | | | □ No |
| | dependents name: | 5. | | | | | | ☐ Yes ☐ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | _ | □ No |
| _ | _ | | | | | | | ☐ Yes |
| 3. | Do your expense expenses of peop | | nan | No | | | | |
| | yourself and you | r depende | nts? ⊔ | Yes | | | | |
| Esti | | es as of yo | our bankrı | uptcy filing date unless y | | | | apter 13 case to report of the form and fill in the |
| | | d for with r | non-cash | government assistance i | f vou know | | | |
| the | | | | cluded it on Schedule I: \ | | | Your exp | penses |
| 4. | The rental or hon payments and any | | | ses for your residence. I r lot. | nclude first mortgag | e 4. | \$ | 725.00 |
| | If not included in | line 4: | | | | | | |
| | 4a. Real estate | taxes | | | | 4a. | \$ | 0.00 |
| | 4b. Property, ho | | | | | 4b. | · | 0.00 |
| | | | | upkeep expenses dominium dues | | 4c. 4d. | | 0.00 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | 5. | · | 0.00 |

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| Deb | tor 1 | Argeniz | Diaz Granados | Case nui | mber (if known) | |
|-----|---------|---------------|---|---------------|-------------------|------------------------------|
| 6. | Utiliti | ies: | | | | |
| ٠. | 6a. | | heat, natural gas | 6a | ı. \$ | 0.00 |
| | 6b. | - | ver, garbage collection | | o. \$ | 0.00 |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | | :. \$ | 155.00 |
| | 6d. | Other. Spe | | | I. \$ | 0.00 |
| 7. | Food | • | ekeeping supplies | 7 | · - | 350.00 |
| 8. | | | hildren's education costs | 8 | | 0.00 |
| 9. | | | ry, and dry cleaning | 9 | | 50.00 |
| | | • | roducts and services | |). \$ | 50.00 |
| | | • | ntal expenses | 11 | · · | 60.00 |
| | | | Include gas, maintenance, bus or train fare. | | . Ψ | 00.00 |
| | | | ar payments. | 12 | 2. \$ | 150.00 |
| 13. | | | clubs, recreation, newspapers, magazines, and books | 13 | 3. \$ | 50.00 |
| | | | ributions and religious donations | 14 | . \$ | 0.00 |
| | | rance. | | | | |
| | | | surance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. | Life insura | nce | 15a | ı. \$ | 0.00 |
| | 15b. | Health ins | urance | 15b | o. \$ | 0.00 |
| | 15c. | Vehicle ins | surance | 15c | :. \$ | 0.00 |
| | 15d. | Other insu | rance. Specify: | 15d | I. \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or included in lines 4 or 20. | | | <u> </u> |
| | Spec | | , , , | 16 | 5. \$ | 0.00 |
| 17. | | | ease payments: | | | |
| | 17a. | Car payme | ents for Vehicle 1 | 17a | ı. \$ | 0.00 |
| | 17b. | Car payme | ents for Vehicle 2 | 17b | o. \$ | 0.00 |
| | 17c. | Other. Spe | ecify: | 17c | :. \$ | 0.00 |
| | | Other. Spe | | 17d | I. \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you did not report | | | |
| | dedu | icted from | your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 100 | | | 0.00 |
| 19. | Othe | r payments | s you make to support others who do not live with you. | | \$ | 0.00 |
| | Spec | ify: | | 19 | · | |
| 20. | | | erty expenses not included in lines 4 or 5 of this form or on S | | | |
| | 20a. | Mortgages | s on other property | | ı. \$ | 0.00 |
| | 20b. | Real estat | e taxes | 20b | o. \$ | 0.00 |
| | 20c. | Property, I | nomeowner's, or renter's insurance | 20c | :. \$ | 0.00 |
| | 20d. | Maintenan | ce, repair, and upkeep expenses | 20d | I. \$ | 0.00 |
| | 20e. | Homeown | er's association or condominium dues | 20e | ·. \$ | 0.00 |
| 21. | Othe | r: Specify: | Pet Care | 21 | . +\$ | 50.00 |
| | | | | | | |
| 22. | | | monthly expenses | | • | 4 640 00 |
| | | | through 21. | | \$ | 1,640.00 |
| | | | 2 (monthly expenses for Debtor 2), if any, from Official Form 106J | - ∠ | \$ | |
| | 22c. / | Add line 22a | a and 22b. The result is your monthly expenses. | | \$ | 1,640.00 |
| 23 | Calc | ulate vour | monthly net income. | | | |
| 20. | | - | 12 (your combined monthly income) from Schedule I. | 232 | ı. \$ | 1,560.04 |
| | | | monthly expenses from line 22c above. | | υ. φ | 1,640.00 |
| | ۷۵۵. | Copy your | monuny expenses nom mie 220 above. | ∠30 | ·φ | 1,040.00 |
| | 230 | Subtract v | our monthly expenses from your monthly income. | | | |
| | 200. | | is your <i>monthly net income</i> . | 230 | :. \$ | -79.96 |
| | | THE TESUIL | to your monthly not income. | | | |
| 24. | Do ve | ou expect a | an increase or decrease in your expenses within the year afte | r you file th | is form? | |
| | For ex | xample, do yo | ou expect to finish paying for your car loan within the year or do you expect | | | ase or decrease because of a |
| | | | terms of your mortgage? | | | |
| | ■ No | 0. | | | | |
| | □ Ye | | Explain here: | | | |

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| Fill in th | nis information to identify | your case: | | | |
|-------------|---|--------------------------------|------------------------------|-------------------------|-------------------------------------|
| Debtor 1 | Argeniz Diaz | Granados | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | <u> </u> | | | | |
| (Spouse if, | filing) First Name | Middle Name | Last Name | | |
| United S | States Bankruptcy Court for | the: NORTHERN DISTRICT | Γ OF ILLINOIS | | |
| Case nu | ımber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | al Form 106Dec laration Abou | ıt an Individual | Debtor's Sc | hedules | 12/15 |
| | r both. 18 U.S.C. §§ 152, 13 | | | | 00, or imprisonment for up to 20 |
| Dic | d you pay or agree to pay | someone who is NOT an atto | rney to help you fill out ba | ankruptcy forms? | |
| • | No | | | | |
| | Yes. Name of person | | | | kruptcy Petition Preparer's Notice, |
| | _ | | | Declaration | , and Signature (Official Form 119) |
| | der penalty of perjury, I de t they are true and correct | clare that I have read the sun | nmary and schedules filed | d with this declaration | on and |
| Х | /s/ Argeniz Diaz Grana | dos | X | | |
| - | Argeniz Diaz Granados | | Signature of I | Debtor 2 | |
| | Signature of Debtor 1 | | | | |
| | Date May 15, 2018 | | Date | | |

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| Fill | in this inform | nation to identify you | r case: | | | | | | | |
|-------------|--------------------------|---|---|---|--|---|--|--|--|--|
| De | btor 1 | Argeniz Diaz Gra | anados Middle Name | Last Name | | | | | | |
| De | btor 2 | riist ivaille | Middle Name | Last Name | | | | | | |
| (Spo | ouse if, filing) | First Name | Middle Name | Last Name | | | | | | |
| Un | ited States Bar | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | | | | | |
| Ca | se number | | | | | | | | | |
| (if kı | nown) | | | | | Check if this is an amended filing | | | | |
| | | | | | | amended ming | | | | |
| ∩f | ficial Fo | rm 107 | | | | | | | | |
| | | | Affairs for Individ | duals Filing for B | ankruptcy | 4/16 | | | | |
| info nun | ormation. If m | ore space is needed, n). Answer every que | ble. If two married people a attach a separate sheet to stion. Irital Status and Where You | this form. On the top of any | | | | | | |
| | - | | | Lived Before | | | | | | |
| 1. | wnat is your | current marital statu | IS? | | | | | | | |
| | ☐ Married | | | | | | | | | |
| | ■ Not mar | ried | | | | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | | | | | |
| | □ No | □ No | | | | | | | | |
| | Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>t</i> . | | | | | |
| | Debtor 1 Pri | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | | |
| | 710 Park D Marengo, I | | From-To: 5/2007-4/2017 | ☐ Same as Debtor | I | ☐ Same as Debtor 1 From-To: | | | | |
| Pa | No Yes. Ma | es include Arizona, Ca ke sure you fill out <i>Scl</i> n the Sources of You | | vada, New Mexico, Puerto R | ico, Texas, Washington and V | Wisconsin.) | | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part | time activities. | endar years? | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill | in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$7,225.82 | ☐ Wages, commissions, bonuses, tips | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | |
| | | | | | | | | | | |

Page 30 of 47 Document Case number (if known) Debtor 1 **Argeniz Diaz Granados** Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$21,762.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$21,527.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** each source (before deductions Describe below. Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

> No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... paid still owe

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Creditor Name and Address Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Person to Whom You Gave the Gift and Address:

Official Form 107

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| 14. | Within 2 years before you filed for bankr | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? | | | | | | | | |
|-----|---|---|--|------------|---|------------------------|--|--|--|--|
| | ■ No | | | | | | | | | |
| | ☐ Yes. Fill in the details for each gift or c | ontributi | on. | | | | | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name | | Describe what you contributed | | Dates you contributed | Value | | | | |
| | Address (Number, Street, City, State and ZIP Code | e) | | | | | | | | |
| Pai | tt 6: List Certain Losses | | | | | | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? | ptcy or | since you filed for bankruptcy, did you | lose anyth | ning because of thef | t, fire, other disaste | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Describe the property you lost and | Descri | be any insurance coverage for the loss | | Date of your | Value of property | | | | |
| | how the loss occurred | Include | the amount that insurance has paid. List page claims on line 33 of Schedule A/B: Pro | | loss | los | | | | |
| | | | od dialina dri line de di Genedale 772. 170 | porty. | | | | | | |
| Pai | t 7: List Certain Payments or Transfers | S | | | | | | | | |
| 16. | Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p | preparin | ng a bankruptcy petition? | | | rty to anyone you | | | | |
| | □ No | | | | | | | | | |
| | | | | | | | | | | |
| | Yes. Fill in the details. | | | | _ | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y | ′ou | Description and value of any property transferred | ′ | Date payment or transfer was made | Amount o paymen | | | | |
| | Upright Law LLC 79 West Monroe Fifith Floor Chicago, IL 60603 dgallagher@uprightlaw.com | | Attorney Fees | | 4/2017 | \$1,650.00 | | | | |
| 17. | Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that No Yes. Fill in the details. | ditors or | to make payments to your creditors? | half pay o | r transfer any prope | rty to anyone who | | | | |
| | Person Who Was Paid | | Description and value of any property | , | Date payment | Amount o | | | | |
| | Address | | transferred | | or transfer was made | paymen | | | | |
| 18. | Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have all | ur busine s made a | ess or financial affairs? as security (such as the granting of a secur | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Person Who Received Transfer | | Description and value of | Describe a | ny property or | Date transfer was | | | | |
| | Address | | property transferred p | | received or debts | made | | | | |

Person's relationship to you

Debtor 1 Argeniz Diaz Granados

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Debtor 1 **Argeniz Diaz Granados**

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No п Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance instrument closed, sold. before closing or Address (Number, Street, City, State and ZIP account number Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still to it? have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Part 9: Identify Property You Hold or Control for Someone Else

- - Nο

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP

Describe the property

Case number (if known)

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Argeniz Diaz Granados

| 24. | 4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | |
|-----|--|---|---|--------------------|--|--|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of ar | ny release of hazardous material? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 26. | Have you been a party in any judicial or admir | nistrative proceeding under any envi | ronmental law? Include settlements | and orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | |
| Par | t 11: Give Details About Your Business or Co | onnections to Any Business | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy | , did you own a business or have ar | ny of the following connections to any | y business? | | | | |
| | A sole proprietor or self-employed in a | a trade, profession, or other activity, | either full-time or part-time | | | | | |
| | ☐ A member of a limited liability compar — | ny (LLC) or limited liability partnersh | ip (LLP) | | | | | |
| | ☐ A partner in a partnership — | | | | | | | |
| | ☐ An officer, director, or managing exec | • | | | | | | |
| | ☐ An owner of at least 5% of the voting of | or equity securities of a corporation | | | | | | |
| | No. None of the above applies. Go to Par | rt 12. | | | | | | |
| | Yes. Check all that apply above and fill in | | 5. | | | | | |
| | Business Name Daddress | Describe the nature of the business | Employer Identification numbe Do not include Social Security | | | | | |
| | (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Dates business existed | | | | | |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | | | |
| | ■ No | | | | | | | |
| | Yes. Fill in the details below. | | | | | | | |
| | Name Date Issued Address (Number, Street, City, State and ZIP Code) | | | | | | | |

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Argeniz Diaz Granados Case number (if known) Debtor 1 Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Argeniz Diaz Granados **Argeniz Diaz Granados** Signature of Debtor 2 Signature of Debtor 1 Date Date May 15, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this infor | rmation to identify yo | ur case: | | |
|---------------------------------|--|-------------------------|--|--|
| Debtor 1 | Argeniz Diaz G | ranados | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the | : NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | | on for Indiv | iduals Filing Under Chaږ | oter 7 12/15 |
| If you are an inc | dividual filing under c | hapter 7, you must fil | l out this form if: | |
| creditors have | ve claims secured by | your property, or | | |
| You must file th | nis form with the cour sever is earlier, unless | | you file your bankruptcy petition or by the dat e time for cause. You must also send copies t | |
| | eople are filing toget and date the form. | her in a joint case, bo | th are equally responsible for supplying corre | ct information. Both debtors must |
| | and accurate as pos your name and case i | | s needed, attach a separate sheet to this form. | On the top of any additional pages, |
| Part 1: List Y | our Creditors Who H | ave Secured Claims | | |
| For any credi information b | | Part 1 of Schedule D | : Creditors Who Have Claims Secured by Prop | perty (Official Form 106D), fill in the |
| | reditor and the propert | y that is collateral | What do you intend to do with the property secures a debt? | that Did you claim the property as exempt on Schedule C? |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | |
| | | | Retain the property and enter into a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | t: | | | |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | |
| _ | | | ☐ Retain the property and enter into a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |

Official Form 108

Creditor's

securing debt:

Description of

securing debt:

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

☐ No

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| Debtor 1 | Argeniz Diaz Granados | Case number (if k | nown) |
|--|--|---|--|
| name: Descrip propert securin | ry | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| For any ui | rmation below. Do not list real estate lea | eases u listed in Schedule G: Executory Contracts and Unex ses. Unexpired leases are leases that are still in effec ease if the trustee does not assume it. 11 U.S.C. § 365 | t; the lease period has not yet ended. |
| Describe | your unexpired personal property leases | 3 | Will the lease be assumed? |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Part 3: Under per | Sign Below nalty of perjury, I declare that I have indic that is subject to an unexpired lease. | ated my intention about any property of my estate tha | |
| | | V | |
| Arg | Argeniz Diaz Granados eniz Diaz Granados ature of Debtor 1 | Signature of Debtor 2 | |
| Date | May 15, 2018 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-14104 Doc 1 Filed 05/15/18 Entered 05/15/18 12:59:17 Desc Main Document Page 42 of 47

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Argeniz Diaz Granados | | Case No. | |
|-------------|--|--|--|--|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPEN | SATION OF ATTOR | NEY FOR DE | EBTOR(S) |
| c | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(bompensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy, | or agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 1,650.00 |
| | Prior to the filing of this statement I have received | | | 1,650.00 |
| | Balance Due | | | 0.00 |
| 2. \$ | 335.00 of the filing fee has been paid. | | | |
| 3. T | he source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. T | he source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. I | I have not agreed to share the above-disclosed compe | ensation with any other person u | unless they are meml | bers and associates of my law firm. |
| I | I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the nam | | | |
| 6. I | n return for the above-disclosed fee, I have agreed to ren | nder legal service for all aspects | s of the bankruptcy c | ase, including: |
| b c | Analysis of the debtor's financial situation, and render. Preparation and filing of any petition, schedules, stater Representation of the debtor at the meeting of creditor [Other provisions as needed] All services, except those identified in pa debtor's bankruptcy objectives including | ment of affairs and plan which is and confirmation hearing, and aragraph 7 below, that are | may be required; d any adjourned hear | rings thereof; |
| | (1) File the certificate required from the incounseling agency for prepetition credit (2) Preparation and filing of all locally req (3) Representation of the debtor at the § 3 (4) Amend any list, schedule, statement, a necessary or appropriate; (5) Motions under § 522(f) to avoid liens (6) Motions, such as motions for abandor (7) Advise the debtor with respect to any agreements if in the best interest of the disigned by the debtor; (8) Removal of garnishments or wage ass (9) Negotiate, prepare and file reaffirmatic (10) Motions under § 722 to redeem exem (11) Compile and forward to the trustee a (12) Consult with the debtor and if there i automatic stay; | counseling; quired forms; 341 meeting; and/or other document recon exempt property; nment, or proceedings to or reaffirmation agreement; debtor; and attend all heari signments; on agreements; npt personal property from and the United States trustics a valid defense or explain | quired to be filed of the clear title to real properties of the clear title to real properties of the clear title to real properties of the clear title to be clear title to be clear title to real properties to be clear to be clea | with the petition as may be property owned by the debtor e and file reaffirmation agreemen any reaffirmation agreemen s and information requested; to a motion for relief from the |

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Notwithstanding any agreement to the contrary, representation of the Debtor in any dischargeability action, adversary proceedings, or heavily litigated matters that are not listed in Paragraph 6 above.

(14) Disclose any agreement and fee arrangement regarding the potential retention of co-counsel.

(Official Form 423); and

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| In re | Argeniz Diaz Granados | | Case No. |
|-------|-----------------------|--|----------|
| | Debtor(s | | |

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

| (Continuation Sheet) | | | | |
|---|--------------------------------|--|--|--|
| | CERTIFICATION | | | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. | | | | |
| May 15, 2018 | /s/ David Gallagher | | | |
| Date | David Gallagher | | | |
| | Signature of Attorney | | | |
| | Upright Law LLC | | | |
| | 79 West Monroe | | | |
| | Fifith Floor | | | |
| | Chicago, IL 60603 | | | |
| | 312-546-4264 Fax: 844-402-1128 | | | |
| | dgallagher@uprightlaw.com | | | |
| | Name of law firm | | | |

ATTORNEY-CLIENT LEGAL SERVICES AGREEMENT FOR CHAPTER 7 BANKRUPTCY

This Agreement is executed between Upright Law LLC ("Firm") and the undersigned ("Client"). The undersigned Partner of Firm has authorized Firm to affix Partner's digital signature upon this Agreement ("Agreement"). Agreement is subject to Partner's further review and approval after consultation with Client. Agreement contemplates bankruptcy related services ("Services") ONLY and no other representation. The Partner will review this Agreement with Client, including which chapter of bankruptcy Client is eligible for.

- 1. Type of Bankruptcy Representation and Scope of Services. Client hires Firm (and not any specific attorney) to provide Services. Firm will immediately begin providing Services bill for all Services, including those provided before this Agreement is signed. Services include all representation to complete Client's legal matter, except Agreement does not include representation in any objection to discharge, adversary proceeding or any heavily contested matter or Services that could not have been contemplated after reasonable diligence by Firm when this Agreement was signed ("Additional Services"). Firm requires upfront payment for Additional Services, which are billed at \$395.00 per hour for attorney time (or the highest hourly rate permitted in Client's jurisdiction) and \$125.00 per hour for paraprofessional time billed in six-minute increments.
- 2. Type of Fee ("Fee"). Client hires Firm under a "FLAT FEE" Agreement whereby Firm agrees to provide Services for a fixed amount of \$ 1650.00 , plus the Bankruptcy Court filing fee of \$ 335.00 for a total Flat Fee of \$ 1985.00 ("Total Flat Fee"). Because this is a flat fee representation, Firm will not provide a monthly accounting. Fee is earned when paid and immediately becomes property of Firm. Fees will be placed into Firm's general expense/operating account and NOT into any Firm IOLTA client trust fund account. Client has sixty days from Client's final payment of Fees to turn in all requested documents or, if Firm has to spend additional time collecting documents due to Client's unreasonable delay, Client may be charged an additional Flat Fee of \$375.00, and any amounts on deposit with Firm to pay filing fees or other costs will be applied toward that \$375.00 Fee. No Chapter 7 petition will be filed until all Fees and costs are paid in full and Client provides all documents. The Flat Fee may increase if Client gives inaccurate information during the course of Firm's representation.
- 3. Payment Term and Authorization. Client may only use a debit card, but not a credit card to pay for Services. Client, who lives in zip code 60152 , is a duly authorized signor on the account ending in 5949 , expiring 04/19 . Firm is authorized to charge account ending in 5949 , the Total Flat Fee of \$ 1985.00 , by single/recurring debits. Client authorizes Firm to adjust debits as necessary to fully pay the Total Flat Fee. Client may cancel future payments only by written notice at least five days in advance. This authorization is effective until Client has paid the Total Flat Fee or has cancelled the authorization. Firm's authority to deduct funds from Client's account ceases upon payment in full of Total Flat Fee, and under no circumstances may the firm deduct funds from the client's account after the case has been filed. Firm is not responsible for damages/costs/fees related to authorized payments. Client will be charged \$25.00 for each bounced payment.

- **4. Virtual Representation.** Firm represents Client primarily through means of telephonic and online communication via email, phone or computer-based virtual meeting room, and not face-to-face at a physical office. Client has elected to use Firm, in part, because Client finds this service to be more efficient and convenient. Client has the right to meet with Partner in person at a mutually agreeable time and location.
- **5. Refund Policy.** If Client cancels, Client will be charged for all Services up to the date of cancellation. Firm will provide an accounting along with any unearned portion of the Fee.
- **6. Debtor's Obligations to Pay Credit Counseling/Debtor Education.** In addition to the Flat Fee, Client is obligated to obtain/pay for: (a) Pre-filing credit counseling and (b) post-filing debtor education instructional course.
- 7. Limited Power of Attorney. Client agrees that the signature on this contract also grants Firm a limited power of attorney to affix its signature to any authorization forms required to (a) obtain tax information from any third party tax preparer, accountant, state or federal taxing authorities or any other party in possession of any type of tax information/returns related to Client, including, but not limited to copies of Client's tax returns and/or transcripts, and (b) obtain due diligence products from third parties including, but not limited to, real estate appraisals and/or comparative market analyses, title searches, asset searches, personal property valuations, and credit reports.
- 8. I/WE UNDERSTAND THAT THE INFORMATION DISCLOSED IN THE PETITION IS GIVEN UNDER PENALTY OF PERJURY AND THAT THE FEDERAL PENALTY FOR PERJURY MAY INCLUDE IMPRISONMENT AND HEAVY FINES.

| | 2017-04-25 | |
|--------|------------|--|
| DATED: | | |

CLIENT(S): FIRM: Upright Law LLC

A Debt Relief Agency

Client: For Firm: /s/ Dave Gallagher

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United States Bankruptcy CourtNorthern District of Illinois

| | | - 10- 1-10 | | |
|-------|--|---|----------------|---------------------------|
| In re | Argeniz Diaz Granados | | Case No. | |
| | | Debtor(s) | Chapter | 7 |
| | VE | RIFICATION OF CREDITOR MA | TRIX | |
| | | Number of C | reditors: _ | 5 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of creditor | rs is true and | correct to the best of my |
| Date: | May 15, 2018 | /s/ Argeniz Diaz Granados Argeniz Diaz Granados Signature of Debtor | | |

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Credit Control, Llc Attn: Bankruptcy 5757 Phantom Dr. Suite 330 Hazelwood, MO 63042

LVNV Funding/Resurgent Capital Po Box 10497 Greenville, SC 29603

Ncc Business Svcs Inc 9428 Baymeadows Rd. Suite 200 Jacksonville, FL 32256

UIC Pathology 2723 Solution Center Chicago, IL 60677